

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F89299

FILED  
Mar 20, 2011  
Secretary of State

Entity Name: NESBIT RESTAURANT, INC.

**Current Principal Place of Business:**

5913 AVENUE B  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

5913 AVENUE B  
JACKSONVILLE, FL 32209

**New Mailing Address:**

FEI Number: 59-2202965

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NESBIT, NATHAN JR  
5801 LUSAID DR  
JACKSONVILLE, FL 32209 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: NESBIT, NATHAN JR  
Address: 5801 LUSAID  
City-St-Zip: JACKSONVILLE, FL 32209

Title: VSD  
Name: NESBIT, NATALIE  
Address: 1719 GLENLEA VISTA DR  
City-St-Zip: CHARLOTTE, NC 28216

Title: V  
Name: NESBIT, ONIRETTA B  
Address: 5801 LUSAID DR  
City-St-Zip: JACKSONVILLE, FL

Title: VSD  
Name: NESBIT, NATHAN III  
Address: 6741 CHESTER PARK CIR.  
City-St-Zip: JACKSONVILLE, FL 32222

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NESBIT, NATHAN JR

D

03/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date